

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AH</i>	<i>12195</i>	<i>2/8/99</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>2-10-99</i>
FORMALITY REVIEW		<i>11491</i>	<i>HRV</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here